

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | MD/12 | TC 19 | 03-21-01 |
| O.I.P.E. CLASSIFIER | MDV | 50 | 04/14/01 |
| FORMALITY REVIEW | 9/4 | 827 | 21-23-01 |
| RESPONSE FORMALITY REVIEW | A M | JC 580 | 08-06-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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10/27/04
08/06/01